

AI Strategy

Digital Information and Technology Strategy

1 July 2025 v1-00



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Introduction

The Artificial Intelligence (AI) Strategy is one of a series of technology strategies which expand and develop the Trust's overall Digital Strategy. Each of the technology strategies set out in more detail the vision and plans for development in one of the main digital areas.

This strategy addresses the Trust's approach to the use of Artificial Intelligence. It is different to the other technology strategies because AI is a fast-changing field of technology development which could be applied in many aspects of ELFT's work rather than being a specific digital component. Because of this, the AI strategy is about how to respond to the opportunities and challenges of AI rather than about plans to deploy specific AI systems/solutions.

This strategy document is aimed at a broad non-technical audience but should also provide guidance to the Trust's digital team and its partners on the key information systems and related plans to support the Trust and the wider integrated care system.

AI is a fast-moving area with significant potential for use in healthcare but also with significant risks. The AI Strategy is intended to help ensure that the Trust achieves value responsibly and securely from AI whilst balancing the investment with other healthcare priorities.

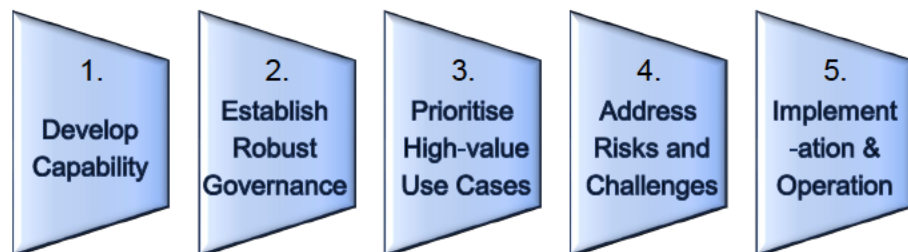
The Trust has produced a separate user guide (ELFT Generative Artificial Intelligence (Gen AI) User Guide) to inform staff about which tools can be used at ELFT and examples to help you get started. This guidance will develop over time as AI tools continue to appear and change. This can be found at <https://www.elft.nhs.uk/intranet/news/new-guides-generative-artificial-intelligence>

In the light of escalating demand for healthcare, combined with significant workforce shortages, there is pressure for the NHS to capitalise on the opportunities presented by technology and AI to support staff and improve care quality and productivity.

AI Strategy Vision and Strategy Approach

ELFT's vision is to utilise AI tools in support of the Trust's strategic goals – to improve patient outcomes and experience, to support staff, and deliver value. AI will be utilised where value can be clearly demonstrated and where we can ensure that it will be used responsibly, safely, sustainably, and ethically.

ELFT's AI strategy approach has five elements.



1. Develop capability

ELFT will need to develop capability in several areas in order to exploit AI. Work on readiness includes building awareness and engagement and developing skills. Identifying priority needs for transformation will help focus use of AI on meeting clinical/service need and in areas informed support and ownership. Lastly preparing investment and implementation assurance to make sure AI investment delivers to the vision above.

2. Establish robust governance

To address the pace of change and potential risks related to AI, additional governance measures will be in place to ensure that investment decisions and ongoing deployment have the right range of stakeholder input and skills. Proposals which include an AI component will be referred to the Digital Data Design Delivery (4D) Group who provide the expertise needed to evaluate project proposals which include AI or complex clinical or data issues.

3. Prioritise High-Value Use Cases

There are a range of areas where value may be achieved from AI developments, some realistic in the short or medium term, others being some time from readiness to adopt into routine clinical practice at scale.

Decisions regarding specific AI investments will need multi-disciplinary input, and investment criteria are set to help ensure that value is achieved from the limited investment resource available.

4. Address Risks & Challenges

AI brings new risks and challenges that have implications for data, systems, and skills, etc. For example, there are risks of AI systems leading to errors, patient harm and the erosion of public trust. Also concerns about the potential of AI to further exacerbate health inequalities.

Long-standing challenges with the implementation and evaluation of health care technology will impact on AI deployment. There is still work to get the basic NHS digital infrastructure and data right – an essential foundation for effective use of AI.

AI also brings new complications and challenges relating to skills, acceptance, ethics, regulation, and resources. All of which will need to be understood and managed.

5. Implementation and Operation

A comprehensive approach is needed to ensure AI systems are used safely and effectively and that the intended value is delivered. Best practice relevant to all digital and transformation projects is needed, but AI implementation needs additional emphasis on:

- Clear accountability and a multi-disciplinary approach.
- Engagement with staff and patients, maintaining open communication.
- Validation of AI solutions and management of data quality.
- Ensuring ongoing monitoring and review of all AI implementations.

Growth and expectations

The last two years has seen enormous growth in public interest and market activity regarding Artificial Intelligence (AI). This has largely been driven by the arrival of ChatGPT in November 2022, followed by Google Gemini and several other Generative AI (GenAI) tools. Interest is broader than just GenAI and includes the application of a wide range of AI tools across all business and service sectors.

Within healthcare, Artificial Intelligence (AI) has been deployed for several years, but here the rate of progress and level of interest has also accelerated.

What is artificial intelligence?

AI is an umbrella term that includes multiple concepts and technologies. There is not a single agreed definition of artificial intelligence, however, a simple working description is *Any computer system that can perform tasks that would otherwise require human intelligence.*

Current AI tools, known as 'Narrow AI' perform specific tasks which would require intelligence in a human being and may even surpass human abilities in these areas. However, such systems are limited in the range of tasks they can perform.

Machine Learning

Most of the recent AI developments have been in Machine Learning which is a subset of AI. This involves software or machines with the ability to learn autonomously by learning from data sets, rather than following pre-defined rules. The digital systems will improve their performance on a given task over time through experience.

Machine learning is the most widely used form of AI and has contributed to innovations like pattern recognition in medical imaging, self-driving cars, speech recognition and machine translation.

All types or approaches to machine learning depend on the system learning from large sets of data. The nature of the self-learning approach (rather than following defined rules) means that you can validate the system using test data sets, but you cannot check how a specific answer was derived. There is also a dependency on the data sets that have been used for the AI training, and these may be incomplete and have errors or biases, which will be reflected in the results produced.

These are important issues to consider when applying such AI tools in the healthcare environment.

Generative AI

Recent AI developments that have most widespread impact have come in the field of generative AI. This involves AI tools that can produce different types of content, including text, images and video in response to user prompts. For example, allowing users to ask a question or set a task. This might be interacting with a chat bot, requesting production of a document, or creating a digital image.

Why AI is important to ELFT and wider healthcare

In many industries AI is already used widely, for example, in facial recognition software on consumer devices, in virtual assistants, and in algorithms that provide results used in search engines and social media platforms.

AI is also showing considerable potential for digital support in healthcare. This includes an ability to help discover new drugs, diagnose illness faster and more accurately and revolutionise clinical note taking. It also promises help with complex decision-making and analysing the huge amounts of data being generated by digital health devices (DHTs).

In the light of escalating demand for healthcare driven by an ageing population and a rise in long-term conditions and multi-morbidity – combined with significant workforce shortages – there is pressure for the NHS to capitalise on the opportunities presented by technology and AI to support staff and improve care quality and productivity. The government is committed to investment in developing the application of AI in the NHS.

Responsible AI

Risks of harm

While there is great potential, there are also significant concerns particularly in a safety-critical sector like healthcare. The World Health Organization has warned of the risks associated with generative AI, calling for rigorous oversight to prevent AI systems leading to errors, patient harm and the erosion of public trust. Researchers have also warned about the potential of AI to further exacerbate health inequalities, for example in minority ethnic groups.

Without proper safeguards, AI could cause or magnify serious harms to individuals, organisations or communities, especially where it is used in patient care.

Environmental consequences

There may be negative impacts beyond patient care, due to the technologies involved. The development and operation of AI tools creates significant carbon emissions, water consumption, and e-waste.

Implementation challenges

The long-standing challenges with the implementation and evaluation of health care technology will impact on AI deployment. There is still work required to get the basic NHS digital infrastructure and data right – an essential foundation for the effective use of AI.

In addition to the basic technology, AI also brings its own set of complications and challenges relating to security, privacy, consent, and governance.

AI Strategy Vision

ELFT's vision is to utilise AI tools in support of the Trust's strategic goals – to improve patient outcomes and experience, to support staff, and deliver value. AI will be utilised where value can be clearly demonstrated and where we can ensure that it will be used responsibly, safely, sustainably, and ethically.

AI Strategy Approach

The 5 elements that together make up our AI Strategy are introduced here and expanded on the following pages.

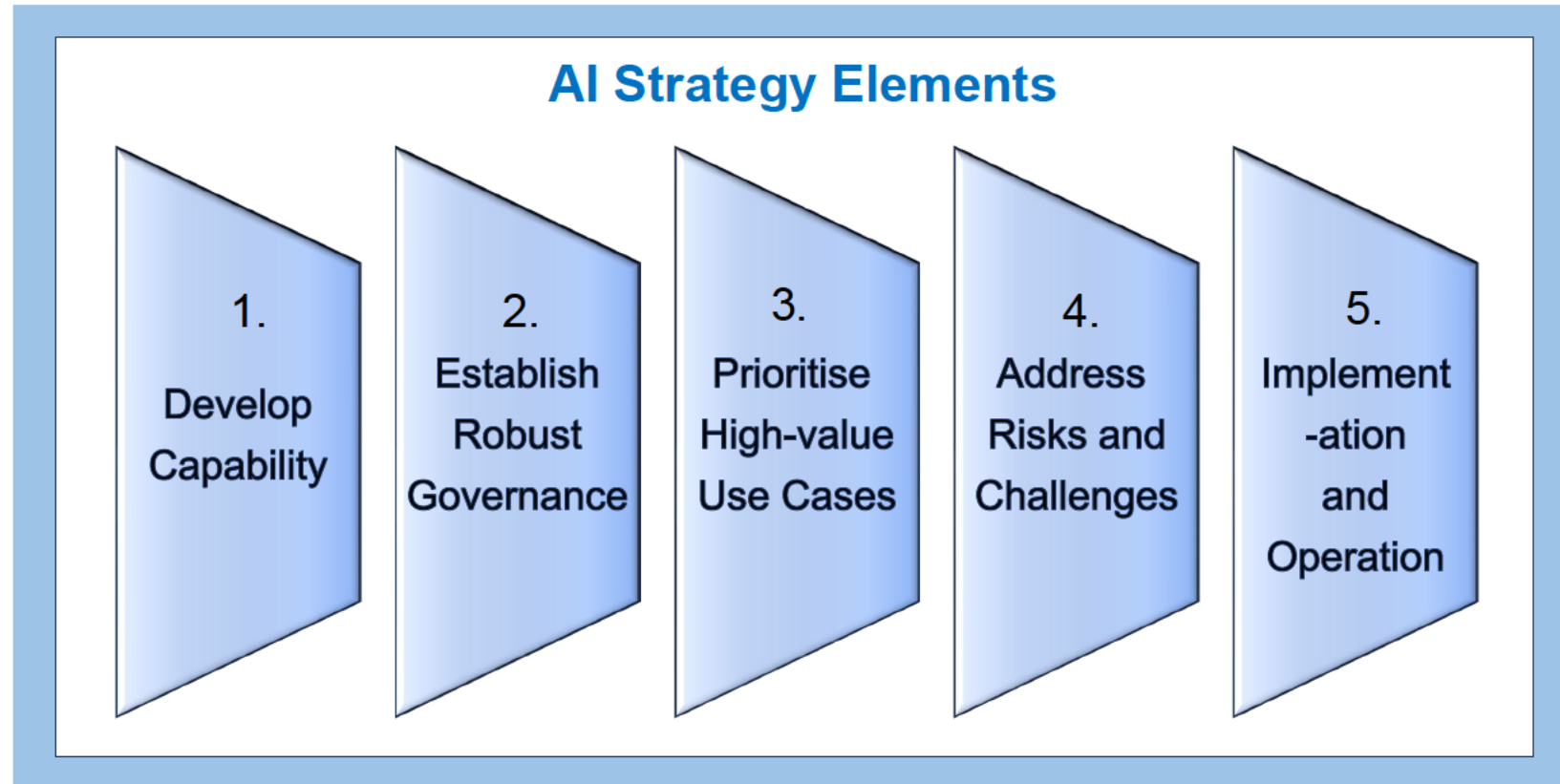
1. Develop capability

Priorities for AI capability are:

- Readiness - building awareness, engagement, and skills.
- Acquisition – a robust approach to add AI tools which also makes best use of ELFT's resources.
- Assurance - investment and implementation assurance.

2. Establish robust governance

The rapid pace of change in AI and the potential risks in this area mean that additional governance measures need to be in place to ensure that investment decisions and ongoing deployment have the right range of stakeholder input and skills.



Also, that communications, guidance and policies are in place to engage and support potential users.

3. Prioritise high-value use cases

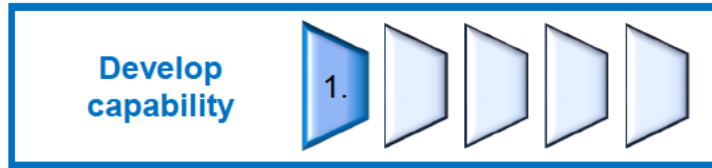
There are a range of areas where there may be value achieved from AI developments. Given the rapid pace of change in AI technology, care is needed in choosing and managing AI developments to ensure value is achieved.

4. Address risks and challenges

AI brings new risks and challenges that have implications for data, systems, and skills, etc

5. Implementation and operation

An approach is needed for the deployment of AI tools/systems ensuring systems are used safely and effectively and that the intended value is delivered.



Capability for AI

Supporting the AI strategy vision requires getting the organisation prepared for AI. Priorities for AI capability are:

- **Foundational AI awareness, engagement, and skills.** Required to identify opportunities and lessons, getting staff aware and ready, building skills and engaging with potential partners.
- **Acquisition approach** – Taking account of ELFT's internal development capabilities and the commercial products available to make best use of ELFT's resources
- **Assurance - investment and implementation assurance.** Investment decisions which consider sustainability of change at scale and the resources needed. Governance arrangements which ensure that use of AI is responsible, ethical and secure.

These priority areas are illustrated in the diagram to the right with some aspects expanded on in later sections of the strategy.

Priorities to be 'AI Ready'

Building awareness, engagement, and skills

Digital supports continuous horizon scanning of AI solutions being adopted within the NHS

Internal communications and engagement – with focus on opportunities, risks, governance.

External engagement & skills – peer and supplier engagement, develop and access skills

Robust approach to selection and acquisition

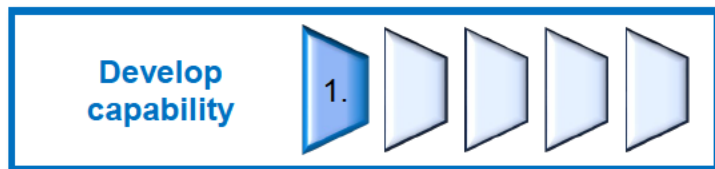
Readiness for AI also includes considering how we should and could acquire AI capabilities. In doing this, issues such as what can be achieved with and without AI, the resource constraints, and the opportunities should be included.

Investment and implementation assurance

Convincing value proposition, future state identified with sustainable adoption at scale, giving pathway transformation

The implementation resources are confirmed – money, people, skills

AI's governance requirements are met, and risk mitigations are agreed and owned by organisation



Context for acquiring AI capability

Factors setting the broader context for acquiring AI capabilities include:

- There is clear potential for digital transformation to support service improvement and financial viability. However, much of this can be achieved with effective change management allied to existing digital tools.
- There are severe financial constraints and a large digital agenda, with work needed on infrastructure basics and improving use of current systems.
- The Trust skills base is low regarding AI, with constraints on resourcing.
- There is a need to ensure value is achieved, but it may be difficult to fully confirm benefits in advance in new and innovative areas.

AI development and procurement

There is a broad choice of approach for ELFT in adopting AI solutions in the foreseeable future:

- Build – largely in-house developed AI to meet ELFT’s specific needs.
 - *Not feasible for ELFT.*
- Outsource – buy bespoke / specific AI tools from skilled developers.
 - *Unlikely to be affordable and still carries a high level of risk*
- Procure – buy ‘off-the-shelf’ solutions from relevant technology suppliers.
 - *Feasible approach, either as ‘stand-alone’ tools that tackle a specific issue or, more likely, added as part of a larger existing software system*

An assessment of these choices is summarised in Appendix C.

Generic GenAI tools (MS Copilot) will also be available.

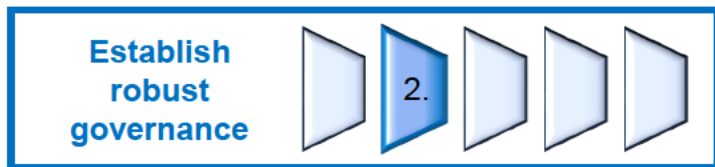
In the medium to long-term a private AI platform may be possible, for example for ELFT/NELFT or at an ICS level. This would enable a vendor’s tools to be tailored and managed in a controlled environment.

Careful selection

NHS organisations do not have the resources to invest in a wide portfolio of AI solutions and see what bears fruit. There needs to be careful evaluation of opportunities considering potential value, costs, and risks (including feasibility). The assessment of AI opportunities should also consider whether simpler (non-AI) solutions may be more effective and less expensive.

Experimental siloed approaches might be useful for building skills and learning what AI can and cannot do, but this approach would also burn resources and is unlikely to create sustainable value.

A later section of the strategy looks at the investment criteria that should underpin AI investment decisions.



Digital System Controls

ELFT has governance processes in place to ensure digital systems are used safely and securely. The governance arrangements have been developed to address the additional issues, particularly risks and data implications, that apply to AI initiatives.

Any new digital system being introduced at ELFT must go through a mandatory approval process. This involves the development of a business plan and project outline, with the support of ELFT's Digital Project Initiation Office (Digital PIO) to address considerations including cybersecurity, Information Governance, system support requirements, financial costs, and clinical safety. The business case then has to be presented to ELFT's Digital Solutions Board for approval before any clinical use of the tool is permitted.

To address the additional design and safety requirements of AI technology, proposals which include an AI component will be referred to the Digital Data Design Delivery (4D) Group who provide the expertise needed to evaluate project proposals which include AI or complex clinical or data issues. The 4D Group will review the AI proposal, considering clinical, ethical, data and IG issues, before making recommendations to the Digital Solutions Board.

Staff or services who wish to use AI tools or services should contact ELFT's Digital PIO in the first instance who will support the service in seeking approval before any new AI tool or platform is commissioned at ELFT.

The Digital PIO can be contacted by emailing elft.digitalpio@nhs.net

ELFT digital governance and the AI proposal review process

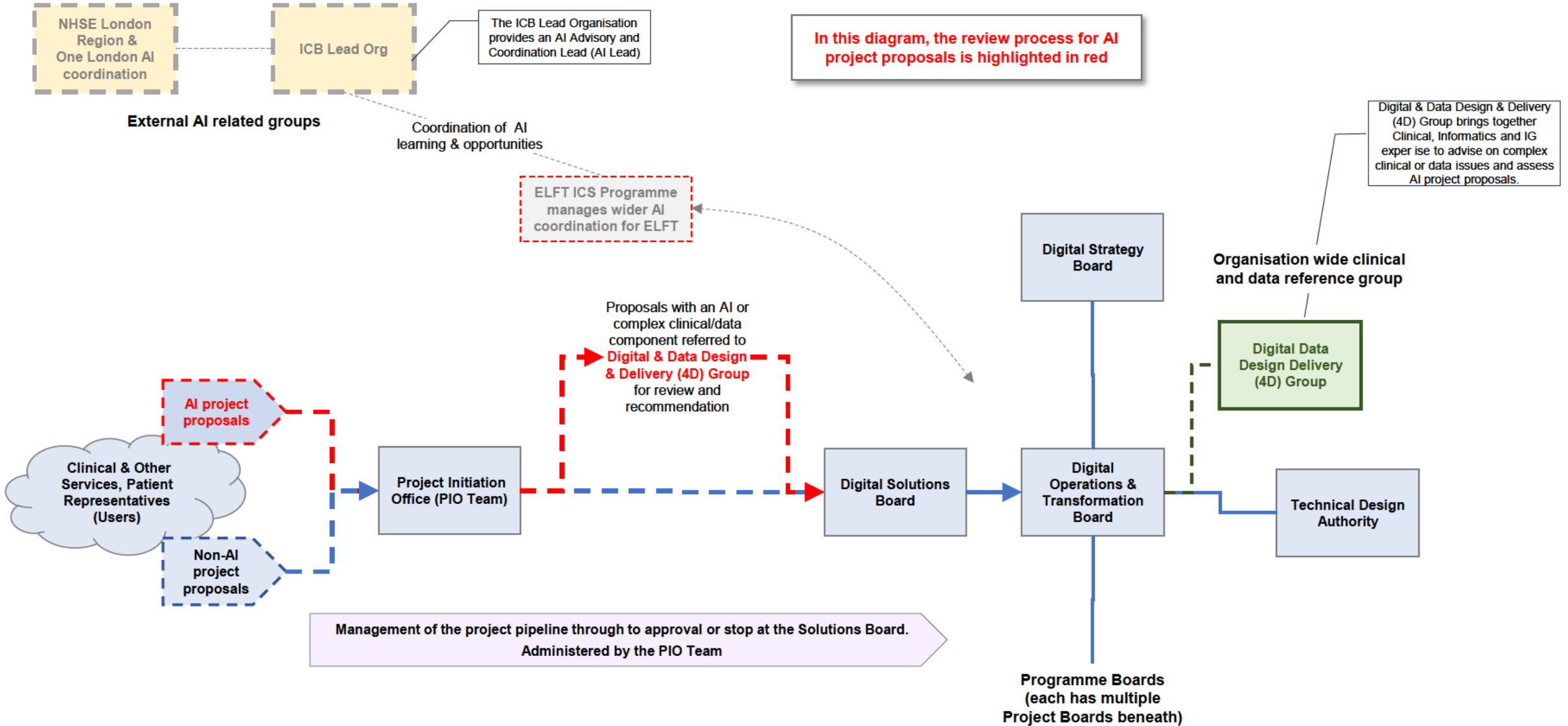
The following page illustrates the AI proposal review process and the wider coordination regarding AP developments across London.

The overall governance structure and programme management groups are shown in a diagram on the next page after that.

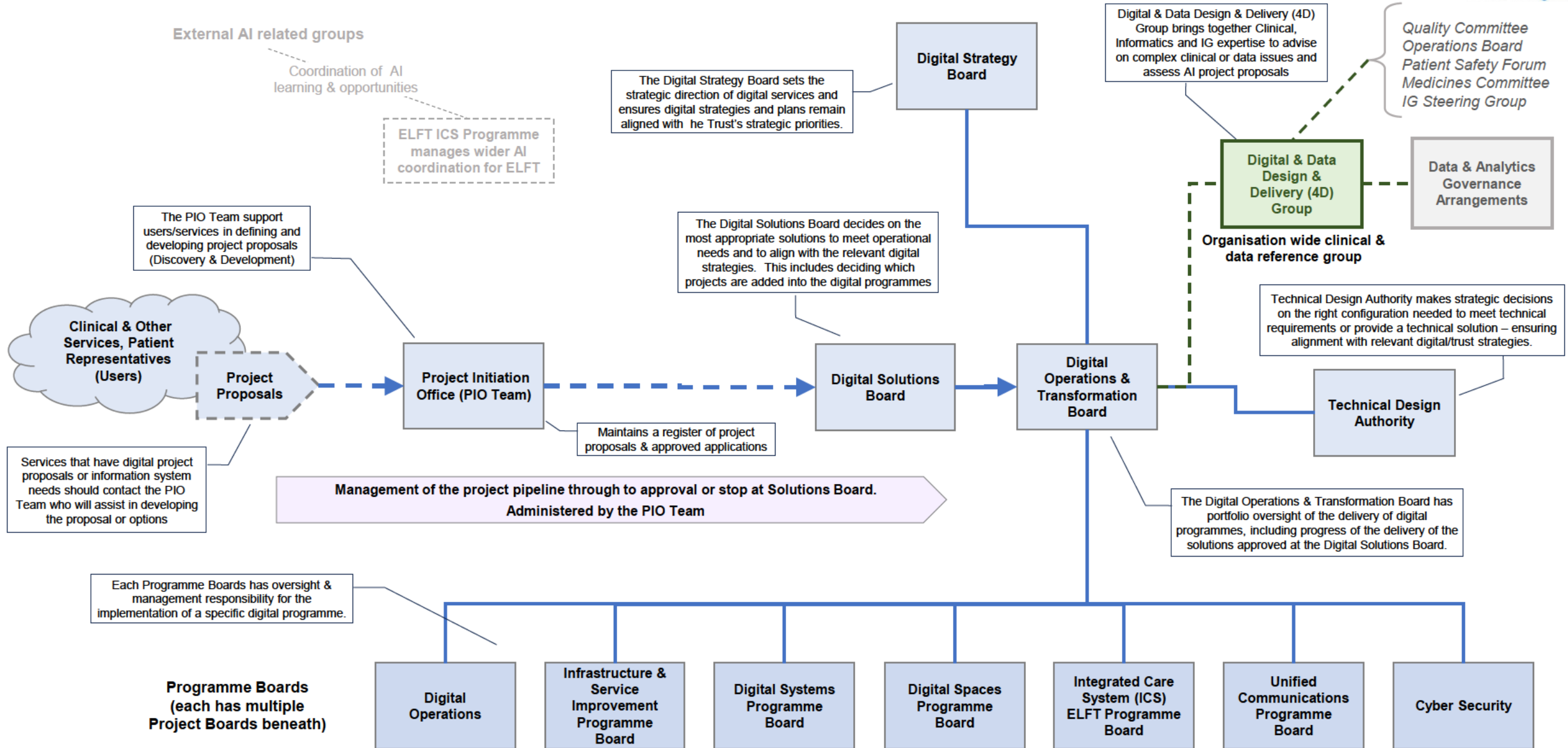
AI coordination across London

One London has proposed a coordinated approach to AI development and deployment across the London area. This is intended to share experience and opportunities so that the value achieved from investment across London is maximised. It will not constrain local plans but seeks to capitalise on successes and avoid repeating mistakes.

Establish Robust Governance – AI review & wider coordination



Establish Robust Governance – overall governance structure



Prioritise
high-value
use cases



Areas in which AI has the potential to deliver value at ELFT

AI tools may be applied to both business and clinical functions. Application within clinical services can be considered in two broad categories of 'back-office' functions, which are more realistic targets for AI adoption in the medium term, and 'frontline' applications of AI in healthcare, most of which are still in research and trial stages, being further from readiness for adoption into routine clinical practice at scale

Business functions

- Cybersecurity
- Supply chain & Inventory Management
- Finance and Procurement
- Education & training
- HR and Recruitment
- Communications & customer service

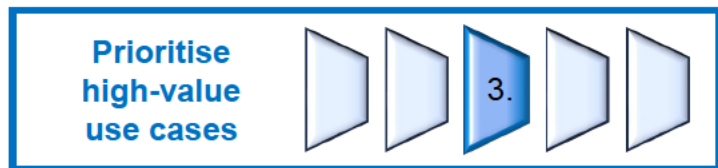
Clinical Back Office *processes & administrative tasks*

- Summarisation and content production
- Creating content for presentation / communication
- Taking admin tasks away from clinicians (e.g. Ambient Scribe Technology)
- Predicting demand & allocating resources

Clinical Frontline *guiding clinical decisions*

- Predicting demand / Resource allocation
- Early detection / screening / triage ... diagnosis
- Risk prediction / risk monitoring & management / screening and diagnosis / direct patient interactions
- Treatments – games / VR / augmenting & facilitating therapies
- Service user interactions – chatbots / agents / companions

In addition to the areas relevant to ELFT above, additional AI impacts are expected, or already affecting NHS healthcare, for example, population health management at an ICS or regional level, medical imaging and diagnostics, and drug discovery in the pharmaceutical sector.



The need to assess priorities

There are many potential areas for the application of AI in the NHS, and also a lot of national focus and supplier hype. Careful evaluation of potential opportunities is needed to ensure that use of AI is driven by meeting priority service needs and where there is solid and informed support to address the change required to help ensure that good value is achieved from the limited investment resource available. This means setting priorities and taking a rounded view that considers benefits, costs, risks, etc.

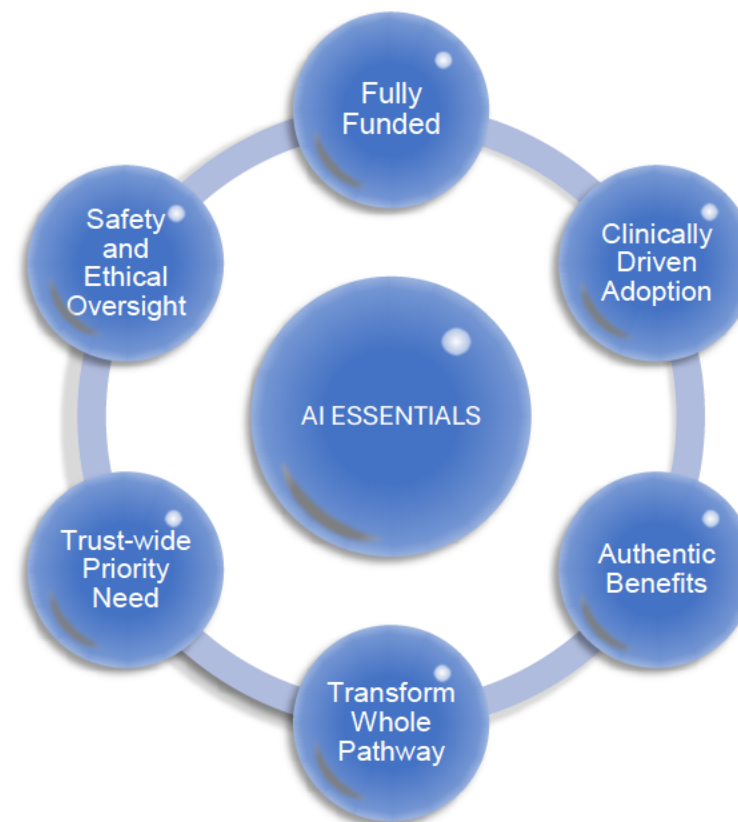
Investment criteria

The AI strategy sets the following investment criteria to help in the evaluation process:

- **Trust-wide Priority Need** – emphasis should be given to initiatives that have wide application, impacting on whole services or across service areas.
- **Transform Whole Pathway** – similarly, applications that will give a step change in transformation along a whole pathway should be sought over tools that will only impact a specific segment or element.
- **Authentic Benefits** – the realism of delivering tangible and consistent benefits needs to be established, these may be in terms of outcomes, efficiency or costs,
- **Clinically Driven Adoption** – successful implementation and sustained adoption requires clinicians to own and value the investment.
- **Safety and Ethical Oversight** – Clinical safety, ethical considerations and other risks need to be carefully evaluated, and sound mitigations identified if risks are not eliminated.
- **Fully Funded** – AI initiatives may attract start-up or pilot funding, but evaluation must ensure funding is in place to cover the full system lifecycle and that any potential exit costs are assessed.

Investment Criteria

The illustration below highlights the key investment criteria that need to be considered when evaluating specific AI investment decisions.



Address risks and challenges



The main risks to be considered regarding AI initiatives are summarised below.

AI Data Privacy and Confidentiality

Information entered into non-secure Gen AI tools may appear in the content created by other users, breaking confidentiality. We will need clear processes for gaining patients' informed consent before using their information, even for secure AI models.

Incorrect or Copyright AI outputs

AI-generated content may be wrong or inaccurate. Outputs created by Gen AI tools may provide fictitious answers that are sometimes referred to as 'hallucinations' or may contain copyrighted information or others' intellectual property.

AI Transparency and Accountability for decisions

It can be challenging to understand how Gen AI models arrive at the outputs they produce. This lack of transparency means humans will need to check the output and take responsibility for using them appropriately.

Biased AI outputs

GenAI tools can incorporate the biases of the data that is used to train them, causing them to systematically and repeatedly discriminate against minority groups who are not accurately represented within the training data.

Digital Exclusion

If service users find AI unacceptable, and introducing AI were to diminish alternative service offers, then this would exclude patients from care.

Human interaction with AI

AI-generated content is not thoughtful or compassionate and may produce content inappropriate for service users. AI-generated content used should be clearly identified as such because failure to disclose this may create mistrust.

Climate impact

Implementing AI at scale can have significant environmental impact due to energy and mineral resource use which must be considered in justifying the overall benefit of an AI technology.

AI and Cybersecurity

Cyber security is a necessary precondition for the safety, resilience, privacy, fairness, efficacy and reliability of AI systems.

AI systems are subject to novel security vulnerabilities that need to be considered alongside standard cyber security threats. Security must be a core requirement throughout its lifecycle.

Keeping AI systems secure is as much about organisational culture, process, and communication as it is about technical measures. Security should be integrated into all AI projects and workflows from the outset. This requires a 'secure by design' approach, and it needs strong leadership that ensures security is a business priority, and not just a technical consideration.

Cyber threats

AI-specific threats include:

- **Creating malicious content** - malicious actors can exploit Generative AI to create deceptive content for phishing attacks or other malicious purposes.
- **Creating toxic content** - prompt injection attacks, when an attacker creates an input that makes the model behave in an unintended way. This could involve causing it to generate offensive content or reveal confidential information.
- **Corruption by manipulating training data** - data poisoning attacks occur when the AI model is tampered with to affect its security and/or bias. LLMs in particular are increasingly used to pass data to third-party applications and services.

Leaders must stay up to date on evolving threats

The National Cyber Security Centre (NCSC) provides up-to-date guidance on rapidly changing security issues.

Address risks and challenges



Many of the challenges below apply to other digital and non-digital developments, but the new and rapid changes in AI development mean that additional care is needed.

AI hype as a driver for adoption

The hype and optimism around AI must not result in ELFT rushing into AI deployment and failing to carefully consider our investments in AI and addressing the complexity and requirements for safe and appropriate use. AI cannot be used ad hoc by enthusiastic individuals; it must be implemented within robust Trust-wide governance arrangements.

Potential poor return on AI investment

The novel challenges of AI implementation make it harder to predict the value that will be achieved from a specific investment. Clear and sustained ownership of the costs and benefits of AI deployment will help to focus on achieving the best value.

Lack of staff competency

Inhouse specialist skills will be required, via recruitment and/or developed inhouse through training, to be able to evaluate, deploy, integrate, and support AI tools effectively. This is not just a technical need, skills will be needed in training, communications, IG etc.

Trust, acceptability and change in culture

There is potential for resistance by users (staff, patients, and carers) if they have concerns about the change process or tools themselves. This may include worries about the impact on staff roles.

Capacity for change in ELFT's clinical and business processes

A lack of standardisation in operating processes across service areas, and in the use of digital systems, may limit the application and adoption of new tools and ways of working. To have strategic value, new solutions must be integrated with operational processes; localised, or 'bolt-on' systems will result in discontinuity or duplicated effort.

Data quality and availability

Incorrect or missing data could be a constraint and is an area that the Trust can work on to support future developments. This includes structured data but also integration of stand-alone systems and removal of 'shadow IT' paper or spreadsheet records. Some potential applications would require data from across partners / sectors.

Getting the basics right first

In the context of financial constraints, investment in 'advanced AI tools' must be balanced with robust basic digital services. Underlying digital technology (e.g. servers, networks, Wi-Fi, user devices) remain critical to enable effective deployment and usage of existing as well as AI tools.

Lack of dedicated NHS AI regulatory framework

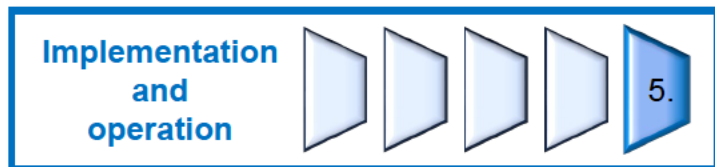
The UK Government hasn't yet produced regulatory legislation specific to the use of AI and relies on existing laws and regulations including the UK GDPR and Data Protection Act 2018, Equality Act 2010, and the Computer Misuse Act 1990. In the absence of dedicated AI regulation, the NHS will continue to develop best practice guidance for the ever-changing state of Generative AI.

Funding for AI projects and ongoing support, monitoring and development

These are complex projects requiring significant time and resource from the Digital service and from the stakeholders who will be using the system. AI must be used only to address top organisational priorities, and only when AI represents a better solution than less complex alternatives in order to justify the opportunity cost of deploying AI instead of an alternative use of the limited resources.

Ethical oversight

The deployment of AI solutions will require more explicit and structured ethical consideration and approval to ensure we do not undermine core values of the NHS, including that patient autonomy and care equality are paramount.



Implementation and operation

A comprehensive approach is needed to ensure systems are used safely and effectively and that the intended value is delivered. Best practice relevant to all digital and transformation projects is needed, but areas to highlight regarding AI implementation are given below.

- Clear accountability and a multi-disciplinary approach
 - Establish clear accountability with a RACI matrix for all aspects of the AI project.
 - Use a multi-disciplinary approach to implementation (including AI, IT, Data and IG skills) with external resource where needed.
- Engage with staff and patients, maintain open communication:
 - Engage with staff and patients regarding AI use to raise awareness and address any concerns, for example, safety, privacy, skills, exclusion, etc.
 - Involve staff and patients in design and evaluation of specific usage.
 - Maintain open two-way communication with staff, patients and other stakeholders, to ensure any issues are identified quickly and then resolved.
- Validation and data quality
 - Include local validation of the system/tools to ensure anticipated performance of the system with local data, patients and clinical scenarios.
 - Continue data assessment and improvements where needed.
- Ongoing monitoring and review:
 - Ongoing monitoring to identify safety risks, or performance issues that may not have been apparent at earlier stages.
 - Monitor and report on metrics that have been set to assess success/outcomes for the project, with review at project and programme level.
 - Feedback learning and lessons that can be applied to further use of similar initiatives or technology.

One London AI Framework

One London's AI Framework sets out a proposed approach for the implementation, use and maintenance of AI within the London health and care system. This is a collaborative methodology, where providers share information about plans and outcomes, and where projects follow a level of consistency in approach so that opportunities for spread and scale can be harnessed.

Appendices

- A – Related Digital Technology Strategies
- B – Current preparation for new Gen AI tech
- C – Options for AI acquisition
- D – AI Investment Evaluation



We care
We respect
We are inclusive

Appendix A – Related Digital Technology Strategies

This appendix shows the related Digital Technology Strategies and how they relate to the AI Strategy



We're enthusiastic about the potential benefits to be gained from AI and believe that ELFT has an obligation to engage with the opportunity AI offers to improve the experience and outcomes of the care we deliver, whilst also guarding against the harms that could come from inappropriate or unsupported use of Gen AI.

We will work with NHS partners and system suppliers to introduce safe and effective uses of AI and we will engage with requests for use of AI across ELFT so that we can better understand the problems which AI could solve. ELFT is currently exploring uses of AI including a chatbot 'virtual agent' to improve communication with services, Natural Language Processing to summarise clinical information, and ambient dictation solutions. We are also engaging with NHS England project to look at the use of Microsoft's AI offerings within Office 365 (e.g NHS Mail).

Current preparations at ELFT to prepare for use of Gen AI:

- **Governance:** The ELFT AI & Automation Steering Group has been established to help drive our understanding and use of AI.
- **New projects:** ELFT's existing governance processes for approval of new digital systems will be followed for any new AI systems seeking approval (see below for more details).
- **Current projects:** Active project with EBO Virtual agent accessed via ELFT website
- **Engaging with NHS England:** Interest expressed in use of Copilot for NHS-hosted MS Office 365 suite of products
- **Engaging with commercial suppliers:** Options appraisal of ambient dictation and documentation solutions
- **Developing staff expert skills & knowledge in AI:** For ELFT to able to employ best practice in testing and implementing AI solutions, engaging external services where required

AI has the potential to make a significant difference to the way we work however, this is a new and developing technology so there must be clear processes and guidelines on its use.

The Trust has produced a user guide to inform you about which tools you can use at ELFT and examples to help you get started. This guidance will develop over time as AI tools continue to appear and change.

We encourage colleagues to learn more and explore ways that GenAI can be used in your role in a safe way. You may use it to summarise complex information from a trusted website like GOV.UK or NHS England however, GenAI technology must not be used with patient, staff or commercial data unless approved by ELFT's Digital Solutions Board.

AI adoption approach

There is a broad choice of approach for ELFT in adopting AI solutions.

- Build – largely in-house developed AI to meet ELFT's specific needs.
- Outsource – buy bespoke / specific AI tools from skilled developers.
- Procure – buy 'off-the-shelf' solutions from relevant technology suppliers.

The choices are summarised in the table to the right. Building AI tools from scratch is not feasible and procuring (outsourcing) bespoke AI tools is unlikely to be affordable and still carries a high level of risk.

In the foreseeable future, the only likely approach is through buying applications. AI tools at ELFT are likely to be enhancements to an existing core application (by the relevant vendor) or focused tools that tackle a specific issue. Generic GenAI tools (MS Copilot) will also be available.

In the longer-term a private AI platform may be possible, for example for ELFT/NELFT or at an ICS level. This would enable a vendor's tools to be tailored and managed in a controlled environment.

Adoption approaches	Build – inhouse & AI workbenches ❌	Outsource – service providers ❌	Buy – apps and APIs ✅
Use case	Enables unique and tailored solution	Huge manual/tuning workload	Rapid and easier if good fit available
Skills & Resources	Needs in-house skills / team available	Provided through contract	Requires vendor support
Data	Control where data is sensitive	Access to data when in house not sufficient	Data is ready
Flexibility	Enables agile/ iterative approach	Enables accelerated build & deployment	Packaged solution is good enough
Risk	High – may not deliver value	Reliant on supplier, risks remain	Managed – can assess tool first
Affordability	High cost and commitment	Costs likely to be prohibitive	Lower cost, reflects packaged nature

Build - *Not feasible for ELFT.*

Outsource - *Unlikely to be affordable and still carries a high level of risk.*

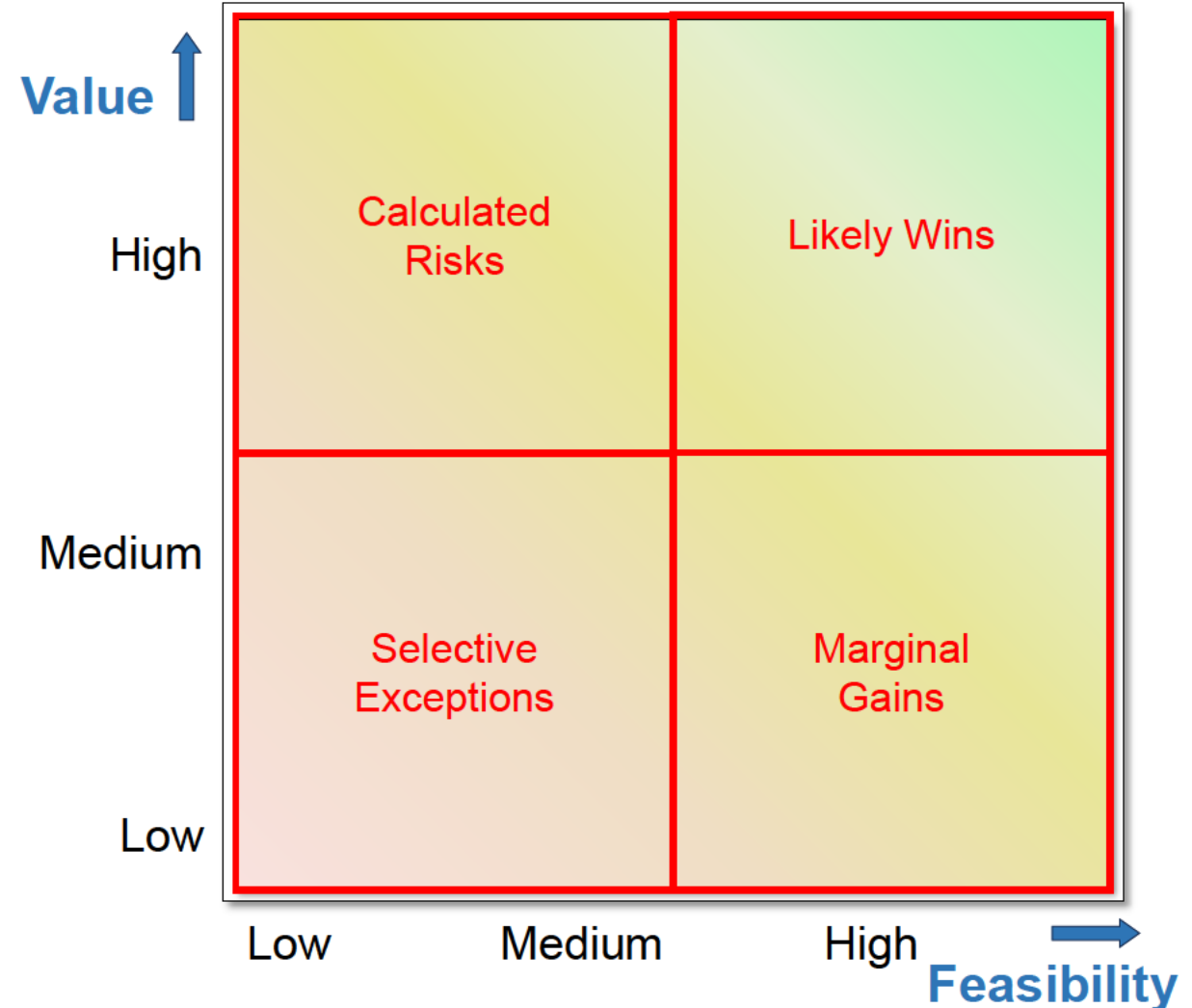
Procure - *Feasible approach, as 'stand-alone' tools that tackle a specific issue or, more likely, added as part of a larger existing software system.*

An approach to assessing AI opportunities and making comparisons is to look at feasibility and value. This may be most helpful when comparing multiple options, particularly at the stage of identifying areas of interest and prioritising for more detailed exploration.

The model is taken from Gartner's 'Use-case Prism'. Opportunities should be assessed in terms of:

- Feasibility
 - Do we have access to the right data?
 - Do we have, or can we access, the right skills?
 - Do we have the technology/architecture to support?
- Value
 - Is there alignment with Trust objectives and values?
 - Is there a sponsor and stakeholder support?
 - Are there measurable outcomes and performance?

Rigorous evaluation through a formal business case process should be undertaken before committing to a specific investment.





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